

COMMUNITY DEVELOPMENT DEPARTMENT

220 East Morris Avenue, Suite 200 South Salt Lake City, Utah 84115 (801) 483-6009 telephone

www.sslc.com

SIGN PERMIT APPLICATION

CHECKLIST PRIOR TO SUBMITTAL

- 1. Complete Application & Affidavit
- 2. Nonrefundable fees
- 3. ONE digital copy of plans (11"x 17") (Flash drives not accepted)
 - Provide a scaled site plan showing lot dimensions, length of property frontage, property lines, adjacent roads, public right of way, buildings, dimensions of the front of buildings, landscaped areas, points of ingress, parking areas. The location of the sign must be accurately depicted. All sign setbacks and clearview triangles must be shown.
 - Provide scaled building elevation(s) showing all building dimensions and exterior architectural elements. The location and size of the sign must be accurately depicted. All sign sizes, heights, illumination, etc. must be shown.
 - Provide complete construction plans for the proposed signage. The plans must depict the total square footage of sign, shape of sign, sign composition, color(s) and material(s) of the sign, illumination, heights, and setbacks of the proposed signage.
 - Provide stamped structural calculations.
 - Provide mounting method documentation and/or footing diagrams and dimensions.
 - Provide the electrical and lighting schedule.
 - Any other applicable documentation requested by staff.
- 4. Location must have an active business license with SSL

** INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED **

PLAN RE-SUBMITTAL

- 1. Response letter stating where corrections were made to plans
- 2. <u>ONE</u> digital copy of updated complete plans (Complete Plans)

Submitting a sign permit application does not authorize the applicant to begin construction. Working without an approved permit violates South Salt Lake Municipal Code. South Salt Lake City reserves the right to pursue enforcement action including but not limited to Notice of Violation and Summons, and Citations.

Applicants are responsible for addressing and correcting all inaccurate or incomplete application documentation. Inactive applications automatically void after 180 days. All voided applications require submittal of new applications, including payment of all costs and fees. All application fees are nonrefundable.



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PERMIT NO.	D APPLICATION DATE:						
EE TITLE OWNER(<u>s)</u>						
NAME:							
MAILING ADDRES	SS:			ZIP:			
PHONE:	** AFFIDAVIT REQUIS	EMAIL:	ALL PERMIT APPLICATIONS (SEE A	ZIP:			
	ATTIDAVIT RESOUR	LD TOR P	ALL I ERMIT ATTECATIONS (SEE A	THE CITED !			
SUSINESS INFORM	MATION						
USINESS NAME:			07.175				
ADDRESS:	CENICE NILINADED.	D	SIAIE:	ZIP: \lL:			
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RIMARY CONTA	<mark>СТ:</mark>						
PHONE:	EMAIL: _						
COMPANY INSTA	LLING THE SIGN:						
	ELING THE SIGN.						
YPE OF SIGN:							
QTY:	SIGN TYPES:	QTY:	SIGN TYPES:				
	WALL SIGN		MONUMENT SIGN				
	PROJECTING SIGN		DEVELOPMENT PYLON SIGN				
	MARQUEE SIGN		DRIVE-THRU MENU SIGN				
	AWNING SIGN		FREEWAY ORIENTED SIGN				
	CANOPY MOUNTED SIGN		BILLBOARD				
	ROOF SIGN		ELECTRONIC MESSAGE CENTE	ER			
	WINDOW SIGN		ALL SIGNS MUST COMPLY WITH TITLE 17				
			COMILI WIII IIILL IV				
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ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name, and I am the party with whom the City should communicate regarding any matter pertaining to this application.

The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until all application requirements have been met, including the payment of any applicable fees, deposits, and/or bonds.

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	-					
	NAME OF APPLICANT (PRINTED):					
	MAILING ADDRESS:			_		
	PHONE #:	EMAIL:		_		
		FOR CITY USE ONLY-				
		•••••				
Total Fees Due:		Receipt #: _				
		Date Paid:				
CITY REVIEW N	IOTES:					
ZONING DISTR	ICT:					
	<u></u>					
ACTIVE BUSINE	ESS LICENSE NAME:	ACCOUNT	#: CURRENT ON REN	IEWAL PAYMENTS:		
			YES	NO		
APPROVED [] DENIED []	DATE:	PLANNER NAME:			
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PROPERTY OWNER'S AFFIDAVIT _____, being duly sworn, depose and say that I/we am/are the current owner of the property involved in this application: that I/we have read the application and attached plans and other exhibits and are familiar with its contents; and that said contents are in all respects true and correct based upon my personal knowledge. Owner's Signature (co-owner if applicable) Owner's Signature Subscribed and sworn to before me this _____ day of ______20 ____. Notary Public Residing in Salt Lake County, Utah My commission expires: _____ AGENT AUTHORIZATION located the owner(s) of the real property _____, South Salt Lake City, Utah, do hereby appoint as my/our agent to represent me/us with regard to this application affecting the above described real property located in the city of South Salt Lake, and authorize______ to appear on my/our behalf before any City Board or Commission considering this application. Owner's Signature Owner's Signature (co-owner if applicable) On the ____ day of ______ 20 ____, personally appeared before me ______the signers(s) of the above Agent Authorization who duly acknowledged to me that they executed the same. **Notary Public** Residing in Salt Lake County, Utah My Commission expires: _____